Agreement for Pre-Tax Parking Fee Program Form

Instructions:

- For DGS employees to begin or terminate participation in the DGS Pre-Tax Parking Fee Program check the appropriate box below.
- Print your name and employee number.
- Fill in the effective dates.
- Sign and date the form.
- Return to the DGS Parking Services Section.

First Name:	MI:	Last Name:
Employee/Payroll ID Number:		
I wish to participate in the DGS Pre-Tax Parking Fee Program.		
I no longer wish to participate in the DGS Pre-Tax Parking Fee Program.		
Date Submitting Form:		
1 st – 15 th of a month the 1		flected beginning with your paycheck dated: the following month of the following month
I understand that as of the date above, my semi-monthly taxable income will be reduced by half the current monthly parking rate. I also understand that the amount will change if there is a change in the DGS published parking fee rate.		
This agreement is legally binding and may not be terminated until I complete another Agreement for Pre-Tax Parking Fee Program Form or my employment is terminated.		

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Date:

US Code § 132(f)

Employee Signature: